IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MARYLAND



Alan Buck

4665 Mattapany Road

Saint Leonard Maryland 20685

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-against-

Secretary of the Navy, Dept Of Navy

614 Sicard St. S.E., suite 100

Washington D.C. 20374 -5072

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.) Complaint for Employment Discrimination

Case No. TDC-18-3289 (to be filled in by the Clerk's Office)

Jury Trial: ■ Yes □ No

(check one)

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Alan Buck	
Street Address	4665 Mattapany Road	
City and County	Saint Leonard, Calvert County	
State and Zip Code	Maryland 20685	
Telephone Number		
E-mail Address		

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	Department of The Navy	
Job or Title	Secretary of the navy	
(if known)		
Street Address	C/o NAVOECMA	
City and County	614 Sicard street S.E. suite 100	
State and Zip Code	Washington Navy Yard , DC 20374 - 5072	
Telephone Number		
E-mail Address		
(if known)		

Defer	ndant No. 2	
	Name	
	Job or Title	
	(if known)	
	Street Address	t
	City and County	
	State and Zip Code	
	Telephone Number	
	E-mail Address	-
	(if known)	
Defe	dout No. 2	
Deler	ndant No. 3	
	Name	
	Job or Title	
	(if known)	
	Street Address	
	City and County	
	State and Zip Code	
	Telephone Number	
	E-mail Address	
	(if known)	
	The second of th	an three defendants, attach an additional page aformation for each additional defendant.)
Place	of Employment	
The a is:	ddress at which I sough	t employment or was employed by the defendant(s)
	Name	Navy Recreation Center
	Street Address	13855 Solomons Island road
	City and County	Solomons , Calvert County
		Maryland 20688
	State and Zip Code	
	Telephone Number	

C.

II. Basis for Jurisdiction

This action is brought for discrimination in employment pursuant to (check all that apply):

Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. § to 2000e-17 (race, color, gender, religion, national origin).	
	(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)
Þ	Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.
	(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)
	Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.
	(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)
	Other federal law (specify the federal law):
	Relevant state law (specify, if known):
	Relevant city or county law (specify, if known):

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A.	The discriminatory conduct of which I complain in this action includes (check all that apply):		
	*	Failure to hire me.	
		Termination of my employment.	
	Ø	Failure to promote me.	
		Failure to accommodate my disability.	
		Unequal terms and conditions of my employment.	
		Retaliation.	
		Other acts (specify):	
	Emplo	Only those grounds raised in the charge filed with the Equal byment Opportunity Commission can be considered by the federal can the court under the federal employment discrimination statutes.)	
В.	It is my best i	recollection that the alleged discriminatory acts occurred on date(s)	
	January 201	3	
C.	I believe that	defendant(s) (check one):	
		is/are still committing these acts against me.	
		is/are not still committing these acts against me.	
D.	Defendant(s) explain):	discriminated against me based on my (check all that apply and	
	**	race Black	
		color	
		gender/sex	
		religion	
		national origin	
	石	age. My year of birth is 1961. (Give your year of birth only if you are asserting a claim of age discrimination.)	
		disability or perceived disability (specify disability)	

E.	The facts of my case are as follows. Attach additional pages if needed.
	After working part time for 10 years, I applied for a full time Maintenance
	position. The employer required a resume and verbal interview. I did not have
	much formal education, so I did not do well. the job was given to a younger
	White male. It was not fair that I was tested for skills that had nothing to
	do with a job that I had already been doing and had excellent performance
	evaluations.

(Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, or the charge filed with the relevant state or city human rights division.)

IV. Exhaustion of Federal Administrative Remedies

A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding the defendant's alleged discriminatory conduct on (date)

March 28, 2018

B.	The Equal Employment Opportunity Commission (check one):		
		has not issued a Notice of Right to Sue letter. issued a Notice of Right to Sue letter, which I received on (date)	
	54	(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)	

C. Only litigants alleging age discrimination must answer this question.

Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding the defendant's alleged discriminatory conduct *(check one)*:

Ø	60 days or more have elapsed.
П	less than 60 days have elansed

V. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

Lost wages from year being converted to full time \$ 54, 897.12	10 43
Leave loss \$13, 812.00	
Compensatory damages	

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where caserelated papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	dudiess on the with the cite.		
	Date of signing: <u>/0-22</u> , 20		
	Signature of Plaintiff Printed Name of Plaintiff	Alan R Buck St	
		nintiff is named in the complaint, attach an additional nature page for each additional plaintiff.)	
В.	For Attorneys		
	Date of signing:	_, 20	
	Signature of Attorney		
	Printed Name of Attorney		
	Bar Number		
	Name of Law Firm		
	Address		
	Telephone Number		
	E-mail Address		
	L-man Address		